

Massachusetts
Department of Public Health

National Pharmaceutical
Stockpile Workgroup

August 6, 2002

Grant Carrow, Ph.D.
Director, Drug Control Program

**WHAT IS THE PUBLIC
HEALTH PROBLEM?**

Disasters (both natural and technologic) and terrorism can have significant public health implications. An explosion, hurricane, flood, or radiation release can quickly threaten the health of thousands of people and overwhelm a community's capacity to respond.

Source: CDC

WHAT IS CDC ROLE?

- In most places, state and local public health agencies are responsible for health issues before, during, and after a disaster.
- CDC developed emergency response capabilities to assist state and local health departments and other nations in addressing public health issues.

Source: CDC

WHAT IS CDC ROLE?

(cont'd)

Additional substantial funding was received in 2002 as a result of an emergency supplemental appropriation to augment state and local planning and preparedness efforts; this money will be used for preparedness planning and response for all 50 states, three cities, the District of Columbia, and U.S. Territories.

Source: CDC

WHAT ARE THE NEXT STEPS?

- Enhance CDC response systems and increase capacity for disaster response at state and local levels.
- Work with states to develop and test disaster- and terrorism-response plans at state and local levels.

Source: CDC

DHHS-funded Programs

- **CDC Cooperative Agreement:** Bioterrorism preparedness and response
- **HRSA Cooperative Agreement:** Hospital emergency preparedness and response
- **MMRS contracts (OEP):** Terrorism preparedness and response (WMD: biological, chemical, radiological)

Review of CDC's Supplemental Program Announcement

Goal of this Program

To upgrade state and local public health jurisdictions' preparedness for and response to bioterrorism, other outbreaks of infectious disease, and other public health threats and emergencies

Source: CDC

Basic Overview

- Supplement to 99051
- Budget Period Feb 19, 2002 – August 30, 2003
- \$918 = \$865 + \$65 - \$12
- FY02 Base
- Direct Assistance Authorized

Source: CDC

Focus Areas

- A – Preparedness Planning and Readiness Assessment
- B – Surveillance and Epidemiology Capacity
- C – Laboratory Capacity - Biological
- D – Supplemental Funding not available
- E – Health Alert Network/Communication and Information Technology
- (NEW) F – Communicating Health Risks and Health Information Dissemination
- (NEW) G – Education and Training

Source: CDC

Program Requirements

- **Critical Capacities:**
 - Include the 14 Critical Benchmarks
 - Defined as: the core expertise and infrastructure to enable public health systems to prepare for and respond to bioterrorism, other infectious disease outbreaks, and other public health threats and emergencies.
 - Activities that may be considered: Examples of activities related to the Critical Capacity.
 - These must be addressed in the work plan before Enhanced capacities are addressed.

Source: CDC

Program Requirements

- **For each Critical Capacity or Selected Enhanced Capacity the recipient must provide the following in their work plans:**
 - State of current capacity
 - An assessment of whether the current capacity is adequate
 - An implementation/improvement plan with objectives
 - Time line
 - Evaluation plan
 - Budget and budget justification (budgets by capacity must be combined by focus area and the 424a(s) must reflect this)

Source: CDC

Unique Populations

- Border states
- Tribal Nations/Organizations
- The Elderly and Persons with disabilities

Source: CDC

Focus Area A: Preparedness Planning and Readiness Assessment

Focus Area A: 3 Sections

Preparedness Planning & Readiness Assessment

- I - Strategic Direction, Coordination and Assessment
- II - Planning for Preparedness and Response
- III - National Pharmaceutical Stockpile Preparedness

Source: CDC

Critical Benchmarks: A-II

Preparedness and Response Capacity

- #5: Timeline for development of State-wide plan
- #6: Timeline for development of Regional plan
- #7: **Develop interim plan to receive and manage items from National Pharmaceutical Stockpile**

Source: CDC

Summary of Capacities: A-II

Preparedness and Response Capacity

Critical Capacity – Respond to Emergencies

- Develop state and local plans
- Exercise plans
- Overall health system readiness
- State and local response capacity

Source: CDC

Summary of Capacities: A-II

Preparedness and Response Capacity

Critical Capacity - Coordinate with Other Assets

- National Pharmaceutical Stockpile
- Coordination with state/local EMA, Federal Response Plan, MMRS, DMATS, DMORTS, HRSA Hospital Preparedness
- Regional Exercises

Source: CDC

Key Issues: A-III

National Pharmaceutical Stockpile Preparedness

- Integration of State and local planning
- Planning must extend from receipt of NPS assets through dispensing
- Planning is only the first step, must develop operational capability
- Exercise, Exercise, Exercise...

Source: CDC

NPS Program Mission

To ensure the availability of life-saving pharmaceuticals, antidotes and other medical supplies and equipment necessary to counter the effects of nerve agents, biological pathogens and chemical agents.

Source: CDC

CDC/NPS Program Activities

- Procurement and management of NPS Inventory;
- Ensuring rapid transport of NPS assets in response to a terrorism incident;
- Coordination with state, local and Federal emergency responders;
- Provision of CDC technical consultants to accompany pharmaceuticals, vaccines or other medical materiel to the area of need;

Source: CDC

CDC/NPS Program Activities (cont'd)

- Operational research and program evaluation; and
- Education and training for state, local and Federal partners.

Source: CDC

NPS Components

- 12-hour Push Packages
- Vendor Managed Inventory (VMI)
- Technical Advisory Response Unit (TARU)

NPS Components 12-hour Push Package

- Arrives by air or ground transport at site designated by state
- Arrives within 12 hours of state request
- Includes antibiotics, vaccines, other pharmaceuticals, medical supplies and equipment

NPS Components
Vendor Managed Inventory

- Inventory supplies
- Specifically tailored to the suspected or confirmed agent or combination of agents
- Can include vaccines, other pharmaceuticals, medical supplies or products

NPS Components
Technical Advisory Response Unit

- Five to six technical advisors from CDC
- Pharmacists, emergency responders, logistics experts
- Advise local authorities on receiving, distributing, dispensing, replenishing, and recovering NPS materiel

NPS Deployment
Phases of Emergency Response

1. Local assets (first response)
2. NPS 12-hour push package
3. VMI

NPS Deployment

Uses of assets

- Treatment of symptomatic populations
- Post-exposure prophylaxis of asymptomatic populations

NPS Deployment

Handling of assets

- Transport
- Storage space
- Environmental conditions
- Security
- Accountability

NPS Deployment

Distribution of assets

- Identification of target locations
- Subdivision of assets
- Mobilization of healthcare staff
- Dispensing to affected individuals
- Logistical support

NPS Workgroup
What is it?

Subcommittee of Massachusetts
Bioterrorism Preparedness Advisory
Committee (established as part of CDC-
funded Bioterrorism Preparedness &
Response Program)

NPS Workgroup
What is it for?

- Advises the Advisory Committee and DPH on implementing NPS-related aspects of the Bioterrorism Preparedness & Response Program (CDC Cooperative Agreement)
- Advises the Hospital Preparedness Planning Committee (HRSA Cooperative Agreement)

NPS Workgroup
What will it do?

According to CDC Cooperative Agreement
Notice of Award:

- Refine interim state-wide NPS asset management plan
- Develop detailed state-wide NPS asset management plan
- Assist in development of regional and local NPS asset management plans

What will it do (cont'd)?

- Prepare to deal with an acute epidemic:
 - Develop detailed plans for receipt of NPS assets
 - Develop regional plans for vaccination of or distribution of antibiotics to entire population within 3-5 days

[illegible]

- April 15, 2002: Workplan
- October 1, 2002: Semi-annual report
- August 30, 2003: Current grant ends

- Expand capacity to manage large inventories of pharmaceuticals and medical supplies for emergency response
- Build capacity to rapidly transport vaccine and pharmaceuticals to disaster areas
- Enhance coordination of emergency responders on pharmaceutical supply issues
- Educate public on role of pharmaceuticals in emergency response

Interim NPS Asset Management Plan

- Request NPS assets
- Transport to state (by NPS Program)
- Receipt of assets (transfer custody to state)
- Distribution
- Recovery
- Oversight
- Training

Vaccine Distribution

Massachusetts Immunization Program

- Tiered distribution system
- Regional distribution depots
- Distributors (BOHs, VNAs, hospitals)
- 4M doses distributed
- 3000 provider sites
